### FORM D

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MANUALLY EXECUTED

## U.S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D

OMB APPROVAL

OMB NUMBER: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response . . 16.00

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering ( check if this is an amendment and name has changed, and indicate change.)							
Midland International Equity QP Fund L.P.							
Filing Under (Check box(es) that apply): Rule 504 Rule 505  Type of Filing: New Filing Amendment	Rule 506 Section 4(6)	ULOE					
A. BASIC IDEN	TIFICATION DATA						
Enter the information requested about the issuer							
Name of Issuer ( check if this is an amendment and name has changed, and indic	rate change.)						
Midland International Equity QP Fund L.P							
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number					
c/o Gerber Taylor Management Company, One Commerce Square,	Suite 1900, Memphis, TN 38103	(Including Area Code) (901) 526-9750					
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number					
(if different from Executive Offices)	ALCONICO	(Including Area Code)					
	ESE, ALL OF NOT DE	( )					
Brief Description of Business	A Property of the Control of the Con	PROCESS'È					
investment activities	2000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Type of Business Organization	The state of the s	NOV 9 1 2003					
corporation Imited partnership, already formed		~ 1000CON					
business trust limited partnership, to be formed	3	THUN SUN					
Actual or Estimated Date of Incorporation or Organization: $0   6  $ $0   6  $		Estimated					
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  [D][E]  CN for Canada; FN for other foreign jurisdiction)							

#### GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

M

2. Enter the information requested for the following:							
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>							
• Each benefi	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;						
Each execut	tive officer and directo	or of corporate issuers and of co	orporate general and managing par	tners of partnership issu	uers; and		
• Each genera	nl and managing partne	er of partnership issuers.					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if i	ndividual)						
Gerber/Taylor Managem					. <u> </u>		
Business or Residence Address	(Number and Street	, City, State, Zip Code)					
One Commerce Square,	Suite 1900, Memp	ohis, TN 38103					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if i	individual)						
Douglass, Michael J.							
Business or Residence Address	(Number and Street	, City, State, Zip Code)					
One Commerce Square,	Suite 1900, Memp						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner		
Full Name (Last name first, if	individual)						
Gerber, Charles C.							
Business or Residence Address	(Number and Street	, City, State, Zip Code)			- <del> </del>		
One Commerce Square,	Suite 1900, Mem	ohis, TN 38103					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if	individual)						
Taylor, Robert Andrew							
Business or Residence Address	(Number and Street	, City, State, Zip Code)					
One Commerce Square,	Suite 1900, Memp	ohis, TN 38103					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner		
Full Name (Last name first, if	individual)						
Pickens, William E.							
Business or Residence Address	(Number and Street	, City, State, Zip Code)					
One Commerce Square,	Suite 1900, Memp	ohis, TN 38103					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if	individual)						
East, David G.							
Business or Residence Address (Number and Street, City, State, Zip Code)							
One Commerce Square,	Suite 1900, Memj	ohis, TN 38103					
Check Box(es) that Apply:	Promoter	Custodial Trustee	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if individual)							
Business or Residence Address	Number and Street	, City, State, Zip Code)			· · · · · · · · · · · · · · · · · · ·		

					B. IN	FORMA	ATION .	ABOUT	OFFER	ING				
1.	Has the	ssuer sold,	or does the	issuer inter	nd to sell, to	o non-accre	dited inves	tors in this	offering?					Yes No
i	Answer also in Appendix, Column 2, if filing under ULOE.													
2.	What is the minimum investment that will be accepted from any individual?*\$500,000								* <u>\$500,000</u>					
	*Minimum may be waived. Yes No													
3.	Does the	offering p	ermit joint o	ownership o	of a single u	ınit?	•••••				•••••	•••••	• • • • • • • • • • • • • • • • • • • •	
4.	solicitati dealer re persons	on of purch gistered wi of such a b	nasers in cou th the SEC roker or dea	nnection wi and/or with	ith sales of : n a state or s	securities in states, list th	the offering the name of	ig. If a pen the broker o	on to be lis or dealer. If	ted is an as I more than	sociated pe	rson or agei	ilar remuner nt of a broke listed are as	er or
Full Nam	e (Last na	me tirst, it	individual)											
Business	or Resider	nce Address	s (Number a	and Street,	City, State,	Zip Code)								<del></del>
			-											
Name of	Associated	l Broker or	Dealer											
States in	Which Per	son Listed	Has Solicite	ed or Intend	ls to Solicit	Purchasers								
(Check	"All States		individual S	States)							•••••			All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [Mi] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID] [MO] [PA] [PR]	
Full Nam	<u> </u>	<del></del>	individual)	(114)	[174]	[01]	(41)	( * A j	[ **** ]	[,,,]	[ ,,,,]	[ ]	[1,14]	
Business	or Resider	nce Addres	s (Number a	and Street,	City, State,	Zip Code)								
Name of	Associated	l Broker or	Dealer		·	<u> </u>								
States in	Which Per	son Listed	Has Solicito	ed or Intend	ds to Solicit	Purchasers	;							
(Check			individual S					[DE]	(DC)	r				Ali States
	[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [M1] [OH]	[GA] [MN] [OK]	(HI) (MS) (OR)	[ID] [MO] [PA]	
- 4	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name (Last name first, if individual)														
Business or Residence Address (Number and Street, City, State, Zip Code)														
Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
(Check			individual !					(05)					tura	All States
	[AL] {IL} [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

[TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEED	s
1.*	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box  and indicate in the columns below the amounts of		
1	the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred	Ψ	
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		\$
	Other (Specify Limited partnership interests)*	\$250,000,000	\$ <u>77,528,905</u>
	Total*	\$250,000,000	\$77, <u>528,905</u>
	Answer also in Appendix, Column 3, if filing under ULOE.	\$ <u>250,000,000</u>	\$11, <u>520,705</u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	70	\$ <u>77,528,905</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Type of	Dollar Amount
	Type of offering Rule 505	Security	Sold \$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		<u> </u>
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs	⊠	\$ <u>30</u>
	Legal Fees	⊠	\$ <u>25,000</u>
	Accounting Fees		\$ <u>0</u>
	Engineering Fees		\$ <u>0</u>
	Sales Commissions (specify finders' fees separately)		\$ <u>0</u>
	Other Expenses (identify) Miscellaneous (blue, sky fees, duplicating, courier, etc.)		\$0
	Total	🖂	\$25,030
	This is a continuous offering. Therefore, the aggregate offering price could be greater than of	or less than this am	ount

	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND USE O	F PROCEEDS		
í	b. Enter the difference between the aggregate Question 1 and total expenses furnished in resis the "adjusted gross proceeds to the issuer."		*\$249,974,970		
5.	Indicate below the amount of the adjusted grobe used for each of the purposes shown. If the an estimate and check the box to the left of the must equal the adjusted gross proceeds to the 4.b above.				
			Payments to Officers, Directors, &	Payments To	
	Salaries and fees		Affiliates  ☐ \$	Others	
			□ \$	□ \$ □ \$	
		machinery and equipment	□ \$		
	<del>-</del>	facilities	□\$		
	Acquisition of other businesses (including the that may be used in exchange for the assets or	value of securities involved in this offering	□Ψ	□Ψ	
	,		□\$	□ \$	
	Repayment of indebtedness		□\$	□ \$	
	Working capital		□ \$	□ \$	
	Other (specify): to be used as described in Iss Memorandum	suer's Confidential Private Placement	□\$	<b>⊠</b> \$ <u>249,974,970</u>	
	Column Totals		□\$	<b>⊠</b> \$ <u>249,974,970</u>	
	Total Payments Listed (column totals added)		* <b>⊠</b> \$ <u>249,974,970</u>		
		D. FEDERAL SIGNATURE			
followi	ng signature constitutes an undertaking by the i	by the undersigned duly authorized person. If the ssuer to furnish to the U.S. Securities and Exchain ny non-accredited investor pursuant to paragraph	nge Commissior	i, upon written request	
Issuer (Pi	int or Type)	Signature	Date		
Midland International Equity QP Fund L.P.				<u>] 17</u> , 2006	
Name of	Signer (Print or Type)	Title of Signer (Print or Type)	•		
Michael J. Douglass  Authorized officer of Gerber/Faylor Manager Issuer			ent Company, C	General Partner of the	
		* See asterisked comment on p.4.			
		ATTENTION			
	Intentional misstatements or omissions	s of act constitute federal criminal violation	ns. (See 18 t	J.S.C. 1001.)	